

EXHIBIT_10

DATE 3/11/09

HB 6012

March 11, 2009

Chairman John Sesso House Appropriations Committee

RE: HB 612

Dear Mr. Chairman and Members of the Committee,

Disability Rights Montana believes that HB 612 proposes unconstitutional changes to our civil commitment statutes.

Montana's commitment law strikes a balance between the need to protect our communities and secure treatment for people with serious mental illness on the one hand, and to protect the medical privacy and personal autonomy of citizens on the other hand. HB 612 would disrupt that balance by:

- Allowing a judge to order the forcible administration of medication to a person who has been involuntarily committed to a community treatment program.
- Allowing a judge to order forcible administration of medication simply because the respondent is not complying with "recommended treatment."
- Lowering the standard for committing someone community treatment by changing "predictably will become a danger to self or others" to "predictably <u>may</u> become a danger to self or others."
- Providing that a person can who is not complying with a community commitment order can be involuntarily committed to Montana State Hospital with no due process and no requirement that the person meets the legal standard for in-patient commitment.

We understand that the goal of the sponsor and supporters is to obtain prompt, early treatment for people with serious mental illness. We also support that goal. However, this bill overshoots its mark. HB 612 would:

- Make substantial changes to a civil commitment code that has served Montana for over 30 years.
- Change a constitutionally-sound commitment standard.
- Result in unnecessary, constitutionally-defective civil commitments and

diminished civil rights for many Montanans.

• Promote the use of the most expensive, restrictive and disruptive level of care over lesser interventions.

• Result in a substantial increase in civil commitments to the Montana State Hospital.

Undo the progress achieved by the Governor's office under Plan 189, which has reduced the State Hospital census from over 220 a year ago to 187 today.

• Threaten the funding sought by a broad coalition of advocates seeking to greatly expand community crisis beds and short-term inpatient services in our communities.

Montana does not need HB 612 and cannot afford it. Thank you for considering our objections and for your thoughtful opposition to this bill.

Sincerely,

Anita Roessmann

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Staff Attorney